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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration  
Submitted With Initial  
Filing

OR

☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number 36992.00089 (HAL 198)

First Named Inventor Kenji Yamagami

**COMPLETE IF KNOWN**

Application Number /Unknown

Filing Date Unknown

Group Art Unit Unknown

Examiner Name Unknown

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and Apparatus for Managing Storage Based Replication

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application<br>Number(s) | Country | Foreign Filing Date<br>(MM/DD/YYYY) Country | Priority<br>Not Claimed  | Certified Copy Attached? |                          |
|--|---------|---|--------------------------|--------------------------|--------------------------|
|  |         |   |                          | YES                      | NO                       |
|  |         |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  |         |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  |         |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|  |         |   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**DECLARATION — Utility or Design Patent Application**

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or Bar Code Label

OR

☒ Correspondence address belowPaul A. Durdik, Esq.  
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name**  
(first and middle [if any]) Kenji**Family Name**  
or Surname YAMAGAMI**Inventor's**  
**Signature***Kenji Yamagami***Date** 12-13-01

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**City****State****Zip****Country****NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name**  
(first and middle [if any])**Family Name**  
or Surname**Inventor's**  
**Signature****Date****Residence: City****State****Country****Citizenship****Mailing Address****City****State****Zip****Country**☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

|                        |                       |
|------------------------|-----------------------|
| Application Number     | Unknown               |
| Filing Date            | Unknown               |
| First Named Inventor   | Kenji Yamagami        |
| Group Art Unit         | Unknown               |
| Examiner Name          | Unknown               |
| Attorney Docket Number | 36992.00089 (HAL 198) |

I hereby appoint:

☐ Practitioners at Customer Number

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## Name/ Registration Number

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

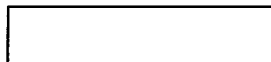
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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

|      |                |
|------|----------------|
| Name | Kenji Yamagami |
|------|----------------|

|           |  |
|-----------|--|
| Signature |  |
|-----------|--|

|      |          |
|------|----------|
| Date | 12-13-01 |
|------|----------|

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

**SIGNATURE of Applicant or Assignee of Record**

|      |  |
|------|--|
| Name |  |
|------|--|

|           |  |
|-----------|--|
| Signature |  |
|-----------|--|

|      |  |
|------|--|
| Date |  |
|------|--|

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 form is submitted.